

00169.002219

PATENT APPLICATION



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
	:	Examiner: M. Baran
YU-LING CHEN)	
	:	Art Unit: 2857
Appln. No.: 09/987,230)	
	:	
Filed: November 14, 2001)	
	:	
For: ENTROPY CODING)	May 19, 2005

Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AFTER ALLOWANCE UNDER 37 C.F.R. § 1.312

Sir:

Subsequent to allowance, and the Issue fee being paid herewith, please amend the above-identified application as follows pursuant to 37 C.F.R. § 1.312. The claims changes are reflected in the listing that begins at page 2, and the Remarks are at page 13.

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Docket No. 00169.002219.

Examiner: M. Baran

Group Art Unit: 2857

Date: May 19, 2005

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

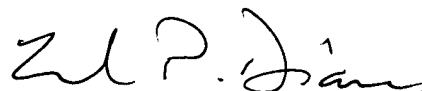
CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 46	MINUS	** 75	= 0	x \$25 \$50	\$0.00
INDEP. CLAIMS	* 6	MINUS	*** 6	= 0	x \$100 \$200	\$0.00
Fee for Multiple Dependent claims \$360°/\$180						\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0.00

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- ☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$____ is enclosed.
- ☐ Charge \$____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Patent and Trademark Office is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$____ to cover the Extension fee for response with a ____-month extension is enclosed.
- ☐ A check in the amount of \$____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our New York Office by telephone at (212) 218-2100 or by facsimile at (212) 218-2200. All correspondence should continue to be directed to our address given below.



Leonard P. Diana
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Reg. No.: 29,296

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